



# How we define recurrent miscarriage matters

Our work encourages a more contextualised overview of how recurrent miscarriage (RM) is defined by providing in-depth insights into the views of women and men with lived experience, and those delivering/managing services and supports. A more nuanced approach to defining RM is warranted, one which is evidence-informed and recognises the needs of women/couples. Our research reinforces international calls for standardisation, and a graded approach to miscarriage care in which women/couples are offered appropriate, individualised, support following one, two and three or more miscarriages

## What do we already know?

RM affects 1-3% of women of reproductive age depending on the definition applied<sup>1</sup>

	Ireland <sup>2</sup>	UK <sup>3</sup>	Europe <sup>4</sup>	US <sup>5</sup>
Term used	RM	RM	RPL	RPL
No. of losses	≥3	≥3	≥2	≥2
Consecutive	✓	X	X	✓
Confirmed	✓	X	X	✓

While some research has examined the lived/care experiences of women and men with RM, how the condition is defined has received limited attention. **Terms such as RM are “more than just words: they carry with them a range of meanings and social consequences”<sup>6</sup>.** A definition reflects the medical evidence and values of a society at the time<sup>6</sup>, thus warrants ongoing scrutiny

In the RE:CURRENT Project, we explored views of how RM is and/or should be defined from the perspectives of people with lived experience of RM and those involved in the delivery and/or management of services and supports

## What did we do?

We conducted qualitative **semi-structured interviews** with participants across the Republic of Ireland from June 2020 to February 2021, ensuring **diverse perspectives** were included

**Women (n=13) and men (n=7) with lived experience** of ≥2 consecutive first-trimester miscarriages were recruited via health professionals and social media; **people involved in the delivery/management of services/supports (n=42)** via the research team’s networks

Interviews were audio-recorded, transcribed, pseudo-anonymised, and analysed using reflexive thematic analysis – **identifying key patterns in the data**

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**RE:CURRENT Project**

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## What did we find?

**THEME 1** | The need for a standardised definition of recurrent miscarriage: Finding a balance between research evidence, individual needs, and healthcare resources

- The need for standardisation in practice
- Following the evidence: who benefits from investigation and treatment/intervention
- Acknowledging complexity and need for flexibility: considerations beyond the number of losses
- Limited resources constrain how recurrent miscarriage is defined and/or how the definition is operationalised

**THEME 2** | The definition is a route to finding an answer, validating women/couples' experience of loss, and providing necessary supports

- Looking for a reason/answer
- Feeling frustrated, dismissed when you don't meet the criteria
- Existing in a liminal space, falling between the cracks in service provision

**THEME 3** | Working around the definition – advocacy and impacts

- Advocacy efforts: “To hell with the system”, “Just lie and say you've had three” [Over-riding the referral criteria]
- Dealing with inappropriate referrals: “They still send in people which is really cruel”
- “If it's not available in the public they will go to the private”

“ I think it will certainly be useful .....just to have some kind of **uniformity** rather than somebody going to this hospital and having this test done, and then going to another hospital and being denied that test. ... I think it would be **useful for clinicians as well as patients...** (OBGYN-H1) ”

“ After the first one and the second one, I suppose **I felt very frustrated and just kind of completely helpless** as well. Because it's something that we really wanted. It's something that we were absolutely devastated about. And being kind of told, well, look just, you know, dust yourselves off and go for it again... **it's very hard to try and contemplate going through that process again...**if it was something that was diagnosable and something that was preventable or something that was treatable (PM5) ”

## How should RM be defined in Ireland?

Based on this study, and a review of international guidelines<sup>7</sup> and extant literature, we recommend that **RM should be redefined as two or more consecutive first trimester miscarriages**—these can include biochemical and molar (but not ectopic) pregnancies, and pregnancies with different partners/donors

## Further information

Dennehy R, Hennessy M, Meaney S, Matvienko-Sikar K, O'Sullivan-Lago R, Uí Dhubhgain J, Lucey C, O'Donoghue K. How we define recurrent miscarriage matters: A qualitative exploration of the views of people with professional or lived experience. *Health Expectations*. 2022. <https://www.doi.org/10.1111/hex.13607>

## References

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